



**Nottingham City Local Involvement Network LINK
Minutes for:
Issues Working Group Meeting**

Date 18th August Time 10-12pm
Unit E2 Southglade Business Park,
Cowlairs, Nottingham, NG5 9RA

Present:

David Turner - DT
Dora Kostiuik - DK
Alan Humberstone - AH
Chair: *Barbara Venes- BV*

In attendance:

Laura Marano - LM
Rob Gardiner - RG
Ian Hutton - IH

	Actions
<p>1. Welcome & Apologies BV welcomes everyone to the meeting. Need to confirm with Nettie future dates and time of meetings. DK has joined the group for the first time.</p>	
<p>2. Minutes from meeting on 4th August BV stated that in relation to issue number 4 there is a drop off point in front of the Clifton Cornerstone. However, the drop-off point is usually used as a car park and is inaccessible to service users of the centre. Minutes approved.</p> <p>3. Current issues <u>Issue #2</u> Draft letter to Transport Authority corrections: residents not residence; buggies instead of prams; The Nottingham City LINK is an independent statutory body; Want to address the letter to Chief Executive of Nottingham City Transport (the private business) and FYI to Councilor portfolio holder and Jennifer Deering. RG raised his concerns around addressing this issues in terms of whether it fits into the LINK remit. He agrees that it is within the remit but the LINK could do more and take this opportunity to plan a wider intervention. As an example the LINK could do a survey outside the Treatment Centre to gather information on what services users think about public transport to the Center. DT first stage would be to find out what is going on around public transport to the Treatment Centre at QMC, the Medilink buses; and hospitals in Nottingham City. DK the equality and diversity team at the city council are always looking into access for disabled people to public transport.</p>	<p>LM</p> <p>LM</p>

<p>AH the Hospitals Transport report is coming up to scrutiny in November. Might be worth feeding back into that.</p> <p>RB first thing to do is ask Laura Thomas if anybody else is doing anything around this issue. If not then LT and Marceline Powel could devise a questionnaire to gather information around the issue. Surveys will be carried out at the Hospitals, the Treatment Centre and where the Medilink buses stop. We are asking local people about what they think of services they use.</p> <p><u>Issue #3</u> Before the address state to Chief Executive. BV confusing the issue about drop-off point as a concern that should be addressed to the Highways authority and not NHS Nottingham City. Separate the two issues and send the one about the Drop-off point to the City Council – highways for road and pavements –Portfolio folder for highways (Brian Grocock). RG thinks this issue should be scored at 3 not 4 and that it is a complaint not a community concern? IH suggested that this might lead to a larger work plan around LIFT buildings around access, and if some are empty due to high cost of rent. Could also look at the usefulness of the LIFT, why are they not utilized, cost effectiveness for the NHS.</p> <p>RG has been doing work around the LIFT buildings as he was trying to set up carers surgeries but realized that it was too expensive. Furthermore, he was doing some work around Mental Health Services in Clifton apparently all mental health services are provided by Regents House. There are no mental health community nurses or outreach workers.</p> <p>RG look into what the county is doing around the LIFT building in Stapleford. Might ask the same questions in the City.</p>	<p>LT and MP</p>
<p>4. Panel Analysis Scoring System</p> <p>AH the wording has changed in order to be more detailed. Specifically at score 1 so that when issues are rejected and allows space to sign post the issue to relevant services. BV we didn't want it to appear that we rejected issues and ignored it. It is clearer that when we can we signpost the issue to the relevant service.</p> <p>AH when an issue scores at 1 then a letter will be sent out to the person that raised the issue and to a third party that is deemed to be able to deal with the issue.</p> <p>DT score 3 appears to take precedence on score 4. AH explained that is down to the discrepancy of the working group to highlight what is worthy of consideration.</p> <p>IH agreed that it is a good starting point for prioritizing issues. It is transparent and facilitates an explanation on why issues precede others.</p> <p>Group agreed that it is an excellent starting point and review it in 6 months time to see if any changes need to be made.</p> <p>5. New Issues</p> <p>IH there are 3 or 4 ideas/issues that can be looked at this year and IH can draft a work plan outline for them by the next Board of Directors meeting (25th August). The main issues are effectiveness of LIFT buildings, public transport to Treatment Centers, feedback from the BME event consultations, joint engagement work with the PCT around local Domestic Violence services.</p> <p>At the next meeting need to address the two new issues one around medical correspondence with partially sighted patients and the second around Tami-Flu distribution on weekends.</p>	
<p>6. AOB</p> <p>No any other business.</p>	

<p>7. Date and time of next meeting:</p> <p>Tuesday 8th of September from 1pm – 3pm Action: inform Nettie Johnson and Alan Humberstone</p>	<p>LM</p>

Minutes taken by Laura Marano

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